

IVERSON'S MODELING AND ENTERTAINMENT GROUP

2027 — THE RETURN

MODEL REGISTRATION & APPLICATION

Thank you for your interest in Iverson's Modeling and Entertainment Group 2027 — The Return. Please complete the information below so our team can learn more about you and your modeling interests.

Participant Name: _____	**Age:** _____
Address: _____	**City:** _____
Zip Code: _____	**Phone Number:** _____
Email: _____	**Social Media Account:** _____

PARENT / GUARDIAN INFORMATION (if applicable)

Parent/Guardian: _____	**Phone Number:** _____
Email: _____	**Emergency Contact:** _____
Emergency Contact Number: _____	

MODEL INFORMATION

Height: _____	**Weight:** _____
Eye Color: _____	**Hair Color:** _____
Tattoos: _____	**Shoe Size:** _____
Bust / Clothing Measurements: _____	**Modeling Experience:** _____

HEALTH & SAFETY

Are there any health, accessibility, allergy, or safety concerns our team should know about in order to provide an appropriate and safe experience? (Please share only information necessary for safety.)

_____

_____

ABOUT YOU

How did you hear about Iverson's Modeling and Entertainment Group?

_____

Tell us about yourself, your interests, your modeling experience, and what you hope to accomplish through Iverson's.

_____

_____

MODELING INTERESTS

■ Runway ■ Editorial ■ Fashion ■ Commercial ■ Print ■ Beauty ■ Lifestyle ■ Entertainment ■ Other: _____

APPLICANT ACKNOWLEDGMENT

I certify that the information provided is accurate to the best of my knowledge. I understand that submitting this registration/application does not guarantee acceptance, selection, or participation in a specific Iverson's event.

Applicant Signature: _____	**Date:** _____
Parent/Guardian Signature (if applicable): _____	**Date:** _____

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